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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
WESTERN DISTRICT OF MICHIGAN	
Case number (if known)	Chapter you are filing under:
	■ Chapter 7
	☐ Chapter 11
	☐ Chapter 12
	☐ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Marilyn First name S. Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	DeYoung Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8754	

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Debtor 1 Marilyn S. DeYoung

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1460 Sunview	If Debtor 2 lives at a different address:
		Muskegon, MI 49445 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Muskegon	Hambon, Subst, Sty, State & Zin State
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. phone: (231)557-4743 e mail: suzied662@msn.com	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Deb	otor 1	Marilyn S. DeYour	ng			case number (if known)	
Par	t 2:	Tell the Court About	Your Bankruptcy	Case			
7.	Bank	chapter of the cruptcy Code you are sing to file under		a brief description of each, see Noo, go to the top of page 1 and ch		1 U.S.C. § 342(b) for Individuals Filing for Ban box.	kruptcy
	CHOC	ising to me under	Chapter 7				
			☐ Chapter 11				
			☐ Chapter 12				
			☐ Chapter 13				
8.	How	you will pay the fee	about how order. If yo a pre-printe	you may pay. Typically, if you are ur attorney is submitting your pay ed address.	e paying the fee you ment on your behal	with the clerk's office in your local court for more rself, you may pay with cash, cashier's check, f, your attorney may pay with a credit card or continuous.	, or money check with
				Pay the fee in installments. If yo Fee in Installments (Official Form		, sign and attach the Application for Individual	ls to Pay
			☐ I request to but is not reapplies to y	hat my fee be waived (You may equired to, waive your fee, and m your family size and you are unab	request this option ay do so only if you ble to pay the fee in i	only if you are filing for Chapter 7. By law, a jurincome is less than 150% of the official povenstallments). If you choose this option, you mal Form 103B) and file it with your petition.	rty line that
9.		you filed for	■ No.				
		ruptcy within the 3 years?	☐ Yes.				
			Distric	et	When	Case number	
			Distric	ct	When	Case number	
			Distric		When	Case number	
10.		any bankruptcy s pending or being	■ No				
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.				
			Debto	r		Relationship to you	
			Distric	ct	When	Case number, if known	
			Debto	r		Relationship to you	
			Distric	ct	When	Case number, if known	
11.		ou rent your	□ No. Go t	o line 12.			
	resid	lence?	■ Yes. Has	your landlord obtained an evictio	n judgment against	you and do you want to stay in your residence	:?
			•	No. Go to line 12.			
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About an Eviction Ju	ndgment Against You (Form 101A) and file it w	ith this

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	warnyn 3. De roui	·IJ		Case number (# known)			
Par	Report About Any Bu	sinesses	You Own as a Sole Pr	oprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location	of business			
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business,				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, Cit	y, State & ZIP Code			
	it to this petition.		Check the appropri	ate box to describe your business:			
			☐ Health Care	Business (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asse	t Real Estate (as defined in 11 U.S.C. § 101(51B))			
			Stockbroker	r (as defined in 11 U.S.C. § 101(53A))			
			☐ Commodity	Broker (as defined in 11 U.S.C. § 101(6))			
			☐ None of the	above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation in 11 U.S	s. If you indicate that yo	1, the court must know whether you are a small business debtor so that it can set appropriate use a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	No.	r am not ming under	Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Ch Code.	apter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Ch	apter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Pari	4: Report if You Own or	Have An	v Hazardous Property	or Any Property That Needs Immediate Attention			
	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?				
	public health or safety? Or do you own any property that needs		If immediate attention needed, why is it need				
	immediate attention?		nocucu, why to it nocc				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property				
	-			Number, Street, City, State & Zip Code			
	urgent repairs?			Number, Street, City, State & Zip Code			

Debtor 1 Marilyn S. DeYoung

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Marilyn S. DeYoung				Case number (if known)		
Par	t 6: Answer These Quest	ions for Re	eporting Purposes			
16.	What kind of debts do you have?	16a.		consumer debts? Consumer or rsonal, family, or household pu		111 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		business debts? Business de vestment or through the operati		
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consumer del	bts or business deb	ots
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any available to distribute to unsecu		s excluded and administrative expenses
	administrative expenses		■ No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	■ 1-49		□ 1,000-5,000		☐ 25,001-50,000
	you estimate that you owe?	☐ 50-99		5001-10,000		□ 50,001-100,000
	owe:	□ 100-1		□ 10,001-25,000		☐ More than100,000
		200-99	99			
19.	How much do you	= \$0 - \$	50.000	□ \$1,000,001 - \$10 m	nillion	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,00	01 - \$100,000	1 \$10,000,001 - \$50		□ \$1,000,000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,0	001 - \$1 million	— \$100,000,001 - \$50	OO MIIIION	iniore triair \$50 billion
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 m		□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50		\$1,000,000,001 - \$10 billion
			001 - \$500,000	□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,0	001 - \$1 million	Δ ψ100,000,001 - ψ30	OO IIIIIIOII	L Word than 400 billion
Par	7: Sign Below					
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury	that the information	n provided is true and correct.
				7, I am aware that I may proce relief available under each cha		r Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.
				I not pay or agree to pay some the notice required by 11 U.S.C		attorney to help me fill out this
		I request	relief in accordance with the	chapter of title 11, United Stat	es Code, specified	in this petition.
		bankrupto and 3571	cy case can result in fines up			perty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,
			yn S. DeYoung S. DeYoung	Signa	ature of Debtor 2	
			e of Debtor 1	Signo		
		Executed	on August 22, 2017	Execu	uted on	
			MM / DD / YYYY		MM / DD	/ YYYY

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Deptor 1 Marilyn S. Deyoung Case number (# known)	Debtor 1 Marilyn S. DeYoung	Case number (if known)	
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Janet S. Thomas Signature of Attorney for Debtor	Date	August 22, 2017 MM / DD / YYYY	
Janet S. Thomas Printed name			
West Michigan Bankruptcy Clinic, P.C.			
P.O. Box 1225 Muskegon, MI 49443-1225			
Number, Street, City, State & ZIP Code			
Contact phone 231-726-4823	Email address	wmbcpc@aol.com	
P41217			
Bar number & State			

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Fill i	n this information to identify yo	our case:			
Debte					
Date	First Name	Middle Name	Last Name		
Debte (Spous	e if, filing) First Name	Middle Name	Last Name		
Unite	d States Bankruptcy Court for th	e: WESTERN DISTRICT C	DF MICHIGAN		
Case (if know	number			_	if this is an
				ameno	ded filing
Sun			nd Certain Statistical Information		12/15
inforn	nation. Fill out all of your sche original forms, you must fill ou	dules first; then complete th	are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page.		
Part	Summarize Your Assets				
				Your as Value o	ssets of what you own
1.	Schedule A/B: Property (Officia 1a. Copy line 55, Total real estat	al Form 106A/B) e, from Schedule A/B		\$	5,000.00
	1b. Copy line 62, Total personal	property, from Schedule A/B		\$	24,880.00
	1c. Copy line 63, Total of all prop	perty on Schedule A/B		\$	29,880.00
Part :	2: Summarize Your Liabilitie	s			
					abilities t you owe
	Schedule D: Creditors Who Have				20,000,00
	,,		the bottom of the last page of Part 1 of Schedule D	\$	29,099.00
	Schedule E/F: Creditors Who Ha 3a. Copy the total claims from P		l Form 106E/F) ıs) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from P	art 2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	54,820.00
			Your total liabilities	\$	83,919.00
Part :	3: Summarize Your Income	and Evnanses			
	Schedule I: Your Income (Officia Copy your combined monthly inc		l	\$	2,464.00
	Schedule J: Your Expenses (Offi Copy your monthly expenses fro			\$	2,429.00
Part 4	4: Answer These Questions	for Administrative and Stati	stical Records		
	Are you filing for bankruptcy u ☐ No. You have nothing to rep	•	heck this box and submit this form to the court with yo	our other sch	nedules.
7.	■ Yes What kind of debt do you have	?			
			debts are those "incurred by an individual primarily for lg for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primar		ve nothing to report on this part of the form. Check this	s box and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Marilyn S. DeYoung

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,434.96

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Debtor 2 Spouse, if filing) First Name Midd Midd Midd Midd Midd Midd MESTER	this filing: Ble Name Last Name		
First Name Midd Debtor 2 Spouse, if filing) First Name Midd United States Bankruptcy Court for the: WESTER	dle Name Last Name		
Debtor 2 Spouse, if filing) First Name Midd Midd Midd Midd Midd Midd MESTER	dle Name Last Name		
Spouse, if filing) First Name Midd United States Bankruptcy Court for the: WESTER			
	dle Name Last Name		
	N DISTRICT OF MICHIGAN		
Name and the second sec			
Case number			☐ Check if this is a amended filing
			g
Official Form 106A/B			
Schedule A/B: Property			12/15
each category, separately list and describe items. Lis	t an asset only once. If an asset fits in more than one	category list the asset in	
ink it fits best. Be as complete and accurate as possi	ble. If two married people are filing together, both are	equally responsible for su	applying correct
formation. If more space is needed, attach a separate nswer every question.	sheet to this form. On the top of any additional pages	, write your name and cas	e number (if known).
Part 1: Describe Each Residence, Building, Land, or C	Other Real Estate You Own or Have an Interest In		
Do you own or have any legal or equitable interest in	any residence, building, land, or similar property?		
☐ No. Go to Part 2.			
Yes. Where is the property?			
1.1	What is the property? Check all that apply		
P.O. Box 8048	_ Single-family home	Do not deduct secured cl the amount of any secure	
Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	
	Condominium or cooperative		
	☐ Manufactured or mobile home	Current value of the	Current value of the
Hilton Head Island SC 29938-0000	_ Land	entire property?	portion you own?
City State ZIP Code	Investment property	\$5,000.00	\$5,000.00
	■ Timeshare □ Other		our ownership interest
	Who has an interest in the property? Check one	(such as fee simple, ten a life estate), if known.	ancy by the entireties, o
	Debtor 1 only	fee	
Beaufort	Debtor 2 only		
County	Debtor 1 and Debtor 2 only	☐ Check if this is con	nmunity property
	At least one of the debtors and another	(see instructions)	manity property
	Other information you wish to add about this ite	m, such as local	
	property identification number: 7 days/starting February 3rd each yea	r - located at:	
	"Spinnaker at the Shipyard" complex.		
	Value based on recent inquiries by de	btor to "purchase a	
	Balance due is maintenance fees that	have accumulated o	ver many years
	TO BE REJECTED/SURRENDERED		
2. Add the dollar value of the portion you own f	or all of your entries from Part 1, including any	entries for	AF 000 00
	t number here		\$5,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb	tor 1 <u>M</u>	arilyn S. DeYoun	g		Case number (i	f known)	
3. C a	ars, vans,	trucks, tractors, sp	ort utility vel	nicles, motorcycles			
	No						
	Yes						
3.1	Make:	Chevrolet		Who has an interest in the property? Check one	the amou	int of any secure	aims or exemptions. Put ed claims on <i>Schedule D:</i>
	Model:	Malibu		Debtor 1 only	Creditors	Who Have Cla	ms Secured by Property.
	Year:	2016 nate mileage:	14,742	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current entire pr	value of the	Current value of the portion you own?
		ormation:	17,172	☐ At least one of the debtors and another	chine pi	operty.	portion you own:
	based balanc	oer fair market es on age and condi e is a estimate . TO BE REAFFIR	ition	☐ Check if this is community property (see instructions)		\$20,000.00	\$20,000.00
	Insured 1/1/18	d: Farm Bureau E	Expires:				
5 A .p	ages you		Part 2. Write t	n for all of your entries from Part 2, including hat number here			\$20,000.00
				erest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ousehold ixamples: I I No I Yes. De	goods and furnishing Major appliances, fur scribe	ngs niture, linens,	china, kitchenware			same of exemptions.
		Usua phon	•	gs - including old tv, laptop, i pad and n	nobile		\$2,000.00
E		including cell phones		o, stereo, and digital equipment; computers, predia players, games	inters, scanners;	music collecti	ons; electronic devices
-				prints, or other artwork; books, pictures, or othe lectibles	r art objects; star	np, coin, or ba	seball card collections;
	No Yes. De	scribe					
E	xamples: \$	musical instruments		d other hobby equipment; bicycles, pool tables,	golf clubs, skis;	canoes and ka	ayaks; carpentry tools;

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D	ebtor 1	Marilyn S. De	eYoung		Case number	(if known)
10			s, shotgur	ns, ammunition, and	related equipment	
	■ No □ Yes.	Describe				
11.	□ No	ples: Everyday clo	othes, fur	s, leather coats, des	signer wear, shoes, accessories	
	■ Yes.	Describe				
			Usual	apparel		\$500.00
12.	□ No		welry, cos	stume jewelry, enga	gement rings, wedding rings, heirloom jewelry, watche	s, gems, gold, silver
			Misc.	costume jewelry	/watch	\$300.00
	Examp ■ No □ Yes. Any ot ■ No	orm animals ples: Dogs, cats, l Describe ther personal and Give specific info	d housel	nold items you did	not already list, including any health aids you did	not list
15					art 3, including any entries for pages you have atta	\$2,800.00
Pa	rt 4: De	scribe Your Finan	cial Asset	s		
D	o you ow	vn or have any lo	egal or e	quitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No		-	-	ome, in a safe deposit box, and on hand when you file	your petition
					Cash	\$80.00
17.	Examp				ounts; certificates of deposit; shares in credit unions, b s with the same institution, list each. Institution name:	rokerage houses, and other similar
				ab a a CC	First Conoral Condit Hatam Italian	wine #000.00
			17.1.	checking	First General Credit Union - balance va	ries \$200.00
			17.2.	savings	First General Credit Union	\$10.00

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De	btor 1	Marilyn S.	DeYoung	Case number (if known)	
	Exam _l		s, or publicly traded stocks ds, investment accounts with brokerag	e firms, money market accounts	
	■ No □ Yes		Institution or issuer name:		
19.		ublicly traded enture	stock and interests in incorporated	and unincorporated businesses, including an interest i	n an LLC, partnership, and
	■ No				
	☐ Yes.	Give specific	information about them Name of entity:	% of ownership:	
	Negoti Non-n	tiable instrumei		and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
	■ No				
	☐ Yes.	Give specific i	nformation about them Issuer name:		
	_Exam _l	ment or pensi ples: Interests		thrift savings accounts, or other pension or profit-sharing pla	ans
	■ No				
	⊔ Yes.	List each acco	ount separately. Type of account:	Institution name:	
	Your s Examp	share of all unu		ou may continue service or use from a company utilities (electric, gas, water), telecommunications companie	s, or others
	■ No □ Yes.			Institution name or individual:	
23.	Annuit	ties (A contrac	t for a periodic payment of money to yo	ou, either for life or for a number of years)	
	No				
	☐ Yes		Issuer name and description.		
			ation IRA, in an account in a qualifie), 529A(b), and 529(b)(1).	d ABLE program, or under a qualified state tuition progr	ram.
	□ Yes		Institution name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts	, equitable or	future interests in property (other th	nan anything listed in line 1), and rights or powers exerc	isable for your benefit
		Give specific	information about them		
	Exam		, trademarks, trade secrets, and othe lomain names, websites, proceeds from		
	■ No □ Yes.	Give specific	information about them		
	Exam		s, and other general intangibles permits, exclusive licenses, cooperative	e association holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific	information about them		
Mc	oney or	property owe	d to you?		Current value of the
					portion you own? Do not deduct secured claims or exemptions.
	_	funds owed to	o you		
	■ No				

 \square Yes. Give specific information about them, including whether you already filed the returns and the tax years......

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De	ebtor 1	Marilyn S. DeYoung	Case number (if known)
	Examp	support	imony, spousal support, child support, maintenance, divorce settlement, propert	ty settlement
	■ No □ Yes.	Give specific information		
	Examp		u insurance payments, disability benefits, sick pay, vacation pay, workers' compou made to someone else	ensation, Social Security
	■ No □ Yes.	Give specific information		
31.		ts in insurance policies oles: Health, disability, or life in	nsurance; health savings account (HSA); credit, homeowner's, or renter's insura	ance
		Name the insurance company	y of each policy and list its value.	
			ny name: Beneficiary:	Surrender or refund value:
32.	If you a		e you from someone who has died trust, expect proceeds from a life insurance policy, or are currently entitled to re	ceive property because
	■ No □ Yes.	Give specific information		
33.			her or not you have filed a lawsuit or made a demand for payment disputes, insurance claims, or rights to sue	
	☐ Yes.	Describe each claim		
	□ No	contingent and unliquidated Describe each claim	I claims of every nature, including counterclaims of the debtor and rights	to set off claims
			8 / 12 2017 tax refunds - based on 2016 refunds.	\$1,200.00
			Right to be paid accrued wages	
			based on highest recent wage -	\$590.00
			paid bi-weekly	
	■ No	nancial assets you did not all Give specific information	Iready list	
	00.	Orto oposino imorniationi.		
36			r entries from Part 4, including any entries for pages you have attached	\$2,080.00
Pa	rt 5: De	scribe Any Business-Related Pr	roperty You Own or Have an Interest In. List any real estate in Part 1.	
_	_ ′	own or have any legal or equital	ble interest in any business-related property?	
[☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commerc ou own or have an interest in farm	cial Fishing-Related Property You Own or Have an Interest In.	
46.		own or have any legal or e	quitable interest in any farm- or commercial fishing-related property?	
	_	. Go to line 47.		

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Debt	or 1 Marilyn S. DeYoung		Case number (if known)	
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
I	to you have other property of any kind you did not already list? Examples: Season tickets, country club membership			
-	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form		· 	
55.	Part 1: Total real estate, line 2			\$5,000.00
56.	Part 2: Total vehicles, line 5	\$20,000.00		
57.	Part 3: Total personal and household items, line 15	\$2,800.00		
58.	Part 4: Total financial assets, line 36	\$2,080.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$24,880.00	Copy personal property total	\$24,880.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$29,880.00

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	U to dita totam	and a tall and to a company			-					
		nation to identify your case:								
De	ebtor 1	Marilyn S. DeYoung First Name	fiddle Name	L	ast Name					
	ebtor 2 ouse if, filing)	First Name N	fiddle Name	L	ast Name					
	-		ERN DISTRICT OF M	IICHIO	GAN					
C-										
	ase number _ known)					Check if this is an amended filing				
Oi	fficial Fo	rm 106C								
S	chedul	e C: The Proper	ty You Cla	im	as Exempt	4/16				
the nee cas For	property you leded, fill out and eded, fill out and enumber (if king each item of	isted on Schedule A/B: Property d attach to this page as many conown). property you claim as exempt	(Official Form 106A/B) pies of <i>Part 2: Addition</i> , you must specify the	as yo nal Pa e amo	our source, list the property that you ge as necessary. On the top of any pount of the exemption you claim.	or supplying correct information. Using claim as exempt. If more space is additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of				
any fun exe	/ applicable s ds—may be ι emption to a p	tatutory limit. Some exemption inlimited in dollar amount. How	s—such as those for vever, if you claim an	healt exen	th aids, rights to receive certain b nption of 100% of fair market valu	enefits, and tax-exempt retirement				
Pa	rt 1: Identi	fy the Property You Claim as E	xempt							
1.	Which set o	f exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.					
	☐ You are cl	aiming state and federal nonban	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)					
	You are c	aiming federal exemptions. 11 l	J.S.C. § 522(b)(2)							
2.	For any pro	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption				
	CONCLUIO 772	proporty	Copy the value from Schedule A/B	Check only one box for each exemption.						
		shings - including old tv,	\$2,000.00	•	\$2,000.00	11 U.S.C. § 522(d)(3)				
	laptop, i pad and mobile phone Line from Schedule A/B: 6.1				100% of fair market value, up to any applicable statutory limit					
	Usual appa	arel hedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line nom Sc	riedule A/B. TTT			100% of fair market value, up to any applicable statutory limit					
		ume jewelry/watch hedule A/B: 12.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(4)				
	Ellic Holli Ge	Tedule A/B. 1211			100% of fair market value, up to any applicable statutory limit					
	Cash	hedule A/B: 16.1	\$80.00		\$80.00	11 U.S.C. § 522(d)(5)				
		1011			100% of fair market value, up to any applicable statutory limit					
	checking:	First General Credit Union	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)				
		hedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit					

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	savings: First General Credit Union Line from Schedule A/B: 17.2	\$10.00 I		\$10.00	11 U.S.C. § 522(d)(5)	
	Lille Hotti Schedule AVD. 17.2			100% of fair market value, up to any applicable statutory limit		
	8 / 12 2017 tax refunds - based on 2016 refunds.	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit		
	Right to be paid accrued wages based on highest recent wage -	\$590.00		\$590.00	11 U.S.C. § 522(d)(5)	
	paid bi-weekly Line from Schedule A/B: 34.2			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 No			ed on or after the date of adjustme	nt.)	
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	215 days before you filed this case	?	
	□ No					
	☐ Yes					

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	•			
Fill in this information to identify yo	our case:			
Debtor 1 Marilyn S. De	oung (
First Name	Middle Name Last N	lame	-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last N	lame	-	
United States Bankruptcy Court for th	e: WESTERN DISTRICT OF MICHIGAN	I	-	
Case number				
(if known)			_	if this is an led filing
			amend	ied illing
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Sec	ured by Propert	У	12/15
	e. If two married people are filing together, both it out, number the entries, and attach it to this			
1. Do any creditors have claims secured	by your property?			
\square No. Check this box and submit	this form to the court with your other sched	ules. You have nothing else t	to report on this form.	
Yes. Fill in all of the information	n below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has	s more than one secured claim, list the creditor se	Parately Column A	Column B	Column C
for each claim. If more than one creditor has	as a particular claim, list the other creditors in Par etical order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 GM Financial Leasing	Describe the property that secures the clai	m: \$24,000.00	\$20,000.00	\$4,000.00
Creditor's Name	2016 Chevrolet Malibu 14,742 mile	es		
	Value per fair market estimate based on age and condition			
	balance is a estimate			
	LEASE TO BE REAFFIRMED			
	Insured: Farm Bureau Expires:			
	1/1/18			
P.O. Box 100	As of the date you file, the claim is: Check a apply.	II that		
Buffalo, NY 14231	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage	ge or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's	s lien)		
At least one of the debtors and another	~	cle lease		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	de lease		
Date debt was incurred	Last 4 digits of account number			
Spinaker at the Shipyard				
HOA	Describe the property that secures the clai	m: \$5,099.00	\$5,000.00	\$99.00
Creditor's Name	P.O. Box 8048 Hilton Head Island	,		
	SC 29938 Beaufort County			
	7 days/starting February 3rd each year - located at:	1		
	"Spinnaker at the Shipyard"			
	complex.			
	Value based on recent inquiries b			
c/o RMC	debtor to "purchase a week now"			
P.O. Box 8048	Balance due is As of the date you file, the claim is: Check a	ll that		
Hilton Head Island, SC	apply.	n urat		
29938	☐ Contingent			

Official Form 106D

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Debtor 1	Marilyn S. DeYo	oung		Case number (if know)
	First Name	Middle Name	Last Name	
Numb	per, Street, City, State & Zi	p Code U	nliquidated	
Who owes	s the debt? Check or		sputed re of lien. Check all that apply.	
■ Debtor			n agreement you made (such as ar loan)	s mortgage or secured
☐ Debtor	1 and Debtor 2 only	□ si	atutory lien (such as tax lien, m	echanic's lien)
☐ At least	one of the debtors an	d another 🔲 Ju	dgment lien from a lawsuit	
☐ Check if this claim relates to a community debt		oa ■ O	ther (including a right to offset)	Maintenance fees
Date debt	was incurred		Last 4 digits of account num	nber
Add the	dollar value of your e	entries in Column	A on this page. Write that nur	mber here: \$29,099.00
	the last page of your at number here:	form, add the do	llar value totals from all pages	\$29,099.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case.17	-03939-JWD D0C4	4.1 Fileu. 08/22	717 Page 20 01 52	
Fill in th	is information to identify your	case:			
Debtor 1	Marilyn S. DeYou	na			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	States Bankruptcy Court for the:	WESTERN DISTRICT OF	MICHIGAN		
Case nu (if known)	mber			_	heck if this is an mended filing
Sched	al Form 106E/F dule E/F: Creditors W				12/15
any execu Schedule Schedule left. Attac name and	tory contracts or unexpired leases G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec h the Continuation Page to this pag case number (if known).	that could result in a claim. A ired Leases (Official Form 100 ured by Property. If more spage. If you have no information	Also list executory contrac 6G). Do not include any cre ce is needed, copy the Par	or creditors with NONPRIORITY claing ts on Schedule A/B: Property (Officional control claims and the claims are the control claims are the control con	al Form 106A/B) and on that are listed in ries in the boxes on the
Part 1:	List All of Your PRIORITY Ur				
_	ny creditors have priority unsecure	d claims against you?			
	o. Go to Part 2.				
□ Y					
Part 2:					
3. Do a	ny creditors have nonpriority unsec	cured claims against you?			
ПΝ	 You have nothing to report in this p 	art. Submit this form to the cour	t with your other schedules.		
Y	es.				
unse	cured claim, list the creditor separatel one creditor holds a particular claim, I	y for each claim. For each claim	listed, identify what type of	each claim. If a creditor has more tha claim it is. Do not list claims already inc conpriority unsecured claims fill out the	luded in Part 1. If more
					Total claim
	Amazon/Synchrony Nonpriority Creditor's Name	Last 4 digits of	of account number 889	2	\$1,382.00
	Attn: Bankruptcy Dept. P.O. Box 965061 Orlando, FL 32896-5061	When was the	e debt incurred?		
Ī	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date	you file, the claim is: Chec	ck all that apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidate	ed		
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and an		PRIORITY unsecured claim	:	
	☐ Check if this claim is for a com		ans		
	debt Is the claim subject to offset?	<u> </u>		greement or divorce that you did not	
	No	☐ Debts to pe	ension or profit-sharing plans	, and other similar debts	
	☐ Yes	Other. Spe	cify Charge Account	over past 3-4 years	

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or 1 Marilyn S. DeYoung	Case number (if know)	
Amazon/Synchrony Nonpriority Creditor's Name	Last 4 digits of account number 9216	\$1,972.00
Attn: Bankruptcy Dept. P.O. Box 965061	When was the debt incurred?	
Orlando, FL 32896-5061		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection service/ during the past 3-4 yrs.	
American Eagle /Synchrony	Last 4 digits of account number 0178	\$2,204.00
Nonpriority Creditor's Name attn: Bankruptcy Dept.	When was the debt incurred?	
P.O. Box 965060	When was the debt incurred:	
Orlando, FL 32896-5060	_	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Charge account/during past 2-3 years	
American Eagle /Synchrony	Last 4 digits of account number 7945	\$202.00
Nonpriority Creditor's Name attn: Bankruptcy Dept. P.O. Box 965060	When was the debt incurred?	
Orlando, FL 32896-5060		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Charge account/during past 1-2 years	

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Debto	or 1 Marilyn S. DeYoung	Case number (if know)	
4.5	Best Buy	Last 4 digits of account number 6168	\$2,716.00
	Nonpriority Creditor's Name P.O. Box 790441	When was the debt incurred?	
	Saint Louis, MO 63179 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Charge account/during past 1-2 years	
4.6	Chase/Southwest Card	Last 4 digits of account number 8144	\$4,584.00
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850-5298	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge account/during past 4-5 years	
4.7	Citibank	Last 4 digits of account number 1063	\$920.00
	Nonpriority Creditor's Name P.O.Box 6500	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dain is. One or all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge account/during past 1-2 years	

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Debto	or 1 Marilyn S. DeYoung	Case number (if know)	
4.8	Discover	Last 4 digits of account number 1750	\$8,861.00
	Nonpriority Creditor's Name P.O. Box 30943 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge account/during past 4-5 years	
4.9	JC Penneys/Synchrony Bank	Last 4 digits of account number 1300	\$5,594.00
	Nonpriority Creditor's Name attn: Bankruptcy Dept. P.O. Box 965060	When was the debt incurred?	
	Orlando, FL 32896-5060		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Charge account/during past 4-5 years	
		= Guiol. Speeding	
4.1 0	Kohl's	Last 4 digits of account number 5157	\$754.00
	Nonpriority Creditor's Name P.O. Box 3043	When was the debt incurred?	
	Milwaukee, WI 53201-3043	- As the basis file devicts at Out 1 line at 1	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Account/over past 3-4 years	

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Debto	r 1 Marilyn S. DeYoung	Case number (if know)	
4.1			
1	Lowe's/Synchrony	Last 4 digits of account number 0965	\$3,930.00
	Nonpriority Creditor's Name attn: Bankruptcy Dept. P.O. Box 965003	When was the debt incurred?	
	Orlando, FL 32896-5060 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge account/during past 2-3 years	
4.1	Old Navy/Synchrony	Last 4 digits of account number 5550	\$826.00
	Nonpriority Creditor's Name attn: Bankruptcy Dept. P.O. Box 965003	When was the debt incurred?	
	Orlando, FL 32893-5003 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge account/during past 2-3 years	
4.1	Sam's Club/Synchrony Nonpriority Creditor's Name	Last 4 digits of account number 4897	\$7,917.00
	attn: Bankruptcy Dept. P.O. Box 965060 Orlando, FL 32896-5060	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge account/during past 4-5 years	

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Debto	or 1 Marilyn S. DeYoung	Case number (if know)	
4.1 4	Sam's Club/Synchrony	Last 4 digits of account number 5566	\$1,625.00
4	Nonpriority Creditor's Name attn: Bankruptcy Dept. P.O. Box 965060 Orlando, FL 32896-5060	When was the debt incurred?	·,
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge account/during past 4-5 years	
4.1 5	Target	Last 4 digits of account number 6988	\$1,180.00
	Nonpriority Creditor's Name	When we the debt in sure 40	
	P.O. Box 1581 Minneapolis, MN 55440-1581	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charge Account/over past 3-4 years	
4.1	The Buckle	Last 4 digits of account number 8142	\$528.00
6	Nonpriority Creditor's Name	Last 4 digits of account number	
	c/o Comenity Bank Attn: Bankruptcy Dept. P.O. Box 182125	When was the debt incurred?	
	Columbus, OH 43218-2125 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge account/during past 2-3 years	

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Debtor	1 Marilyn S. DeYoung		Case number (if know)	
4.1	TJ Maxx/Syncrhony Bank	Last 4 digits of account number	8827	\$7,211.00
	Nonpriority Creditor's Name attn: Bankruptcy Dept. P.O. Box 965060 Orlando, FL 32896-5060	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plans, and other similar debts	
	Yes	Other. Specify Charge acc	ount/during past 4-5 years	
4.1 8	Walmart/Synchrony	Last 4 digits of account number	2728	\$1,826.00
	Nonpriority Creditor's Name attn: Bankruptcy Dept. P.O. Box 965065	When was the debt incurred?		
	Orlando, FL 32896-5060			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐Yes	■ Other. Specify Charge acc	ount/during past 2-3 years	
		· · · · · · · · · · · · · · · · · · ·		
4.1 9	Younker's Nonpriority Creditor's Name	Last 4 digits of account number	4023	\$588.00
	c/o Comenity Bank Attn: Bankruptcy Dept. P.O. Box 182125 Columbus, OH 43218-2125	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No	·	•	
	Yes	Other. Specify Charge acc	ount/during past 1-2 years	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 Marilyn S. DeYoung

Case number (if know)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 54,820.00
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 54,820.00

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Marilyn S. DeYou	ng		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	OF MICHIGAN	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 GM Financial Leasing P.O. Box 100 Buffalo, NY 14231 Lease for 2016 Chevy Malibu through 6/20

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		<u> </u>			
Fill in this	information to identify you	r case:			
Debtor 1	Marilyn S. DeYo	una			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT (OF MICHIGAN		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
		dabtana			
Sched	lule H: Your Cod	aeptors			12/15
your name	and number the entries in the eand case number (if known you have any codebtors? (ii	n). Answer every question		, 0	p of any Additional Pages, write
_	· ·	, , ,	·		
■ No					
☐ Yes	3				
	hin the last 8 years, have yona, California, Idaho, Louisiana				ty states and territories include)
■ No.	. Go to line 3.				
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor				editor to whom you owe the debt
	Name, Number, Street, City, State and	ZIP Code		Check all schedul	es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lir	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information t	o identify your ca	ase:									
Del	btor 1	Marilyn S. D	eYoung			_						
	btor 2 buse, if filing)					_						
Uni	ited States Bankrup	tcy Court for the	WESTERN DISTRICT	OF MICHIGAN		_						
	se number								ed fil	showin	g postpetitic	
0	fficial Form	<u> 1061</u>					N	1M / DD/ \	/YY	Y		
S	chedule I:	Your Inco	ome									12/15
sup spo atta	plying correct infouse. If you are sep ch a separate shee	ormation. If you parated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not inclu	spouse is de inforn	s liv natio	ing with on abou	you, incl your spo	ude ouse	inforr e. If m	nation abou ore space is	ut your s needed,
1.	Fill in your emplinformation.	oyment		Debtor 1				Debtor 2	2 or	non-fi	ling spous	е
	If you have more		Employment status	■ Employed				☐ Empl	oye	b		
	attach a separate information about		Employment status	☐ Not employed				☐ Not e	mpl	oyed		
	employers.		Occupation	wellness assista	ant (69						
	Include part-time, self-employed wo		Employer's name	Sanctuary at the	e oaks/1	rini	ty					
	Occupation may i or homemaker, if		Employer's address	1740 Village Dr. location Muskegon, MI 4								
			How long employed th	nere? 1 year								
Pai	rt 2: Give De	tails About Mon	•									
	imate monthly incouse unless you are		ate you file this form. If y	ou have nothing to re	eport for a	any I	ine, write	e \$0 in the	spa	ace. Ind	clude your n	on-filing
	ou or your non-filing e space, attach a se		re than one employer, co	mbine the information	n for all e	mplo	yers for	that perso	on o	n the li	nes below. I	f you need
							For Del	otor 1			btor 2 or ing spouse	
2.	, ,	0 /	ry, and commissions (becalculate what the monthly		2.	\$		917.00	\$	S	N/A	<u>\</u>
3.	Estimate and list	t monthly overti	me pay.		3.	+\$		0.00	+	\$	N/A	<u>\</u>
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$	9	17.00		\$	N/A	

Deb	tor 1	Marilyn S. DeY	oung			Case r	number (<i>if ki</i>	nown)	_			
						For	Debtor 1		i	For Debto		
	Copy	y line 4 here		. 4		\$	917	7.00		\$	N/A	
5.	l ist :	all payroll deduc										
0.	5a.		and Social Security deductions	5	a.	\$	201	1.00		\$	N/A	Δ
	5b.		tributions for retirement plans		a. b.	\$ _		0.00	_	\$	N/A	
	5c.	•	ributions for retirement plans		c.	\$-		0.00	_	\$	N/A	
	5d.	•	ments of retirement fund loans		d.	\$		0.00	_	\$	N/A	
	5e.	Insurance			e.	\$		0.00	_	\$	N/A	
	5f.	Domestic supp	ort obligations		f.	\$		0.00	_	\$	N/A	
	5g.	Union dues	-	5	g.	\$	(0.00	_	\$	N/A	
	5h.	Other deductio	ns. Specify:	5	h.+	\$	(0.00	+	\$	N/A	4
6.	Add	the payroll dedu	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6		\$	20	1.00	_	\$	N/A	
7.	Calc	ulate total month	nly take-home pay. Subtract line 6 from line 4.	7		\$	716	6.00	_	\$	N/A	 A
8.	List	all other income	regularly received:						_	_		_
	8a.	Net income from	m rental property and from operating a business,									
		profession, or f	rarm ent for each property and business showing gross									
			ry and necessary business expenses, and the total									
		monthly net inco		8	a.	\$	(0.00		\$	N/A	Α
	8b.	Interest and div	vidends	8	b.	\$	(0.00		\$	N/A	4
	8c.		payments that you, a non-filing spouse, or a depende	ent								_
		regularly receive										
			, spousal support, child support, maintenance, divorce property settlement.	8	c.	\$	(0.00		\$	N/A	Δ
	8d.	Unemployment			d.	\$_		0.00	_	\$	N/A	_
	8e.	Social Security	-		e.	\$-	1,748		_	\$	N/A	
	8f.	-	ent assistance that you regularly receive	·	٠.	*—	1,7-1		-	Ť	147	<u> </u>
			sistance and the value (if known) of any non-cash assistar	nce								
			, such as food stamps (benefits under the Supplemental									
			ance Program) or housing subsidies.	0.	ı	œ.				c	N1//	
	0.0	Specify: Pension or retire	roment income	8 ¹		\$ \$		0.00	_	\$ \$	N/A	
	8g. 8h.			8	y. h.+	*		0.00	_	· — —	N/A	
	OII.	Other monthly	income. Specify:		11.+	_ -		0.00		Ψ	N/A	1
9.	Add	all other income	. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9	.	\$	1,748	3.00		\$	N	/A
					_ '			1 [,	1	
10.			come. Add line 7 + line 9.	10.	\$	2	2,464.00	+ 5	<u> </u>	N/A	<u>\</u> = \$ _	2,464.00
	Add	the entries in line	10 for Debtor 1 and Debtor 2 or non-filing spouse.		<u> </u>			L			_	
11.			r contributions to the expenses that you list in Schedu									
		de contributions fr r friends or relative	rom an unmarried partner, members of your household, yo	our dep	en	dents,	your room	ımat	es,	and		
			es. ounts already included in lines 2-10 or amounts that are n	ot avai	lah	le to n	av expens	es li	ster	d in Schedu	ıle .I	
	Spec		ourne arroady moradou in imos 2 10 or arroadio and dro in	or avai	iub	ю ю р	ay oxpone		0.00		. + \$	0.00
										_	_	
12.			le last column of line 10 to the amount in line 11. The									
	appli		he Summary of Schedules and Statistical Summary of Ce	rtaın Li	abı	lities a	nd Related	d Da	ta,	ıf it 12.	. \$	2,464.00
	арріі	C3										
											Comb	
13.	Do v	ou expect an inc	rease or decrease within the year after you file this for	rm?							monti	nly income
	■	No.										
	_	Yes. Explain:	Income is noted as an average - Debter had m	ore be	٠		liar in th	0 1/)2r	that are n	ot over	acted to
	ш	100. Explain.	Income is noted as an average - Debtor had mere-occur.	ore iii	Jul	s ear	nei ili til	e ye	ai	uial di e i	ior exbe	scieu iu
			i G-occui.									
			Social security is noted as a net after Medicare	9								

Fill	in this informa	ation to identify yo	our case.			l		
	otor 1	Marilyn S. D				Chec	k if this is:	
	AGI 1	Walliyli 3. D	eroung				An amended filing	
	otor 2 ouse, if filing)							ving postpetition chapter the following date:
Unit	ted States Bankı	ruptcy Court for the	: WESTE	ERN DISTRICT OF MICHIC	GAN	Ī	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	orm 106J						
		J: Your						12/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this t n.				
Par		ribe Your House	hold					
1.	Is this a joir No. Go to							
		es Debtor 2 live	in a separ	ate household?				
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.		penses include	han I	No				
		f people other t d your depende		Yes				
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp		a date after the l		uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it cluded it on Schedule I: Y			Your exp	enses
(,						
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4. \$		600.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		erty, homeowner's				4b. \$		25.00
		e maintenance, re eowner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Deb	tor 1 Marilyn S. DeYoung	Case num	nber (if known)	
6.	Utilities:			
О.	6a. Electricity, heat, natural gas	6a.	\$	100.00
	6b. Water, sewer, garbage collection	6b.	·	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	150.00
	6d. Other. Specify:	6d.	· -	0.00
7.	Food and housekeeping supplies	— 7.	·	325.00
8.	Childcare and children's education costs	8.	· · · · · · · · · · · · · · · · · · ·	0.00
9.	Clothing, laundry, and dry cleaning	9.	· -	125.00
	Personal care products and services	10.	·	85.00
	Medical and dental expenses	11.	·	100.00
	Transportation. Include gas, maintenance, bus or train fare.		·	
	Do not include car payments.	12.	\$	250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	· ·	0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.		219.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:	170	¢	250.00
	17a. Car payments for Vehicle 1	17a.	·	350.00
	17b. Car payments for Vehicle 2	17b.	· -	0.00
	17c. Other. Specify:	17c.	·	0.00
40	17d. Other. Specify:	17d.	>	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on School			
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
21.	Other: Specify:	21.	+\$	0.00
22	Calculate your monthly expenses			
22.	22a. Add lines 4 through 21.		\$	2,429.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		φ	2,429.00
			φ	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,429.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,464.00
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,429.00
				<u> </u>
	23c. Subtract your monthly expenses from your monthly income.		•	35.00
	The result is your <i>monthly net income</i> .	23c.	Φ	33.00
24	Do you expect an increase or decrease in your expenses within the year after you	ı fila thic	s form?	

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: Expense are anticipated - Debtor is temporarily living with relatives - Must move within the next two months

Fill in this informa	ation to identify your	case:						
Debtor 1								
	Marilyn S. DeYou First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bank	kruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN					
Case number								
(if known)					☐ Check if this is an			
					amended filing			
Official Form	106Dec							
Declarati	on About a	n Individua	I Debtor's Sci	hedules	12/15			
years, or both. 18	obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below							
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
■ No								
☐ Yes. Na	ame of person				Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119)			
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
X /s/ Maril	yn S. DeYoung		X					
	S. DeYoung		Signature of D	Debtor 2				
	of Debtor 1		Ç					
Date Au	ugust 22, 2017		Date					
	_							

FI	l in this inform	nation to identify yo	ur case:					
De	btor 1	Marilyn S. DeY			and Maria			
De	ebtor 2	First Name	Middle Name	Li	ast Name			
	ouse if, filing)	First Name	Middle Name	La	ast Name			
Un	ited States Bar	nkruptcy Court for the	: WESTERN DISTRICT	OF MICHIG	AN			
Ca	ise number							
	nown)						☐ Ch	neck if this is an
							an	nended filing
	fficial Fo							
St	atement	of Financial	Affairs for Indiv	iduals	Filing for E	Bankruptcy		4/10
			sible. If two married people d, attach a separate sheet t					
		n). Answer every qu		o this iorii	. On the top of an	iy additional pages, w	vrite your	name and case
Pa	rt 1: Give D	etails About Your M	larital Status and Where Yo	ou Lived B	efore			
	-	current marital sta						
1.	what is your	current maritai sta	tus ?					
	☐ Married							
	■ Not mar	ried						
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?						
	□ No							
	Yes. Lis	t all of the places you	lived in the last 3 years. Do	not include	where you live now	w.		
	Debtor 1 Pri	ior Address:	Dates Debtor	1	Debtor 2 Prior A	ddress:		Dates Debtor 2
			lived there		_			lived there
	1949 Ruddiman Muskegon, MI 49445		From-To: during 10/13	3 to	☐ Same as Debtor 1			☐ Same as Debtor 1 From-To:
		,	6/15					
	1628 S F	Tiffany Club Pl.	From-To:		☐ Same as Debtor	4		☐ Same as Debtor 1
		Lucie, FL 34952	6/15 to 10/16	6	☐ Same as Debtor	1		From-To:
_								
3. sta			ever live with a spouse or I alifornia, Idaho, Louisiana, N					
	.					-		,
	■ No □ Yes. Ma	ske sure vou fill out S	chedule H: Your Codebtors (Official For	m 106H)			
		ike sure you iiii out oi	chedule II. Toul Codebiols (Official For	11 10011).			
Pa	rt 2 Explai	n the Sources of Yo	ur Income					
4.	Did you have	e any income from e	employment or from operat	ting a busi	ness during this y	ear or the two previo	us calen	dar years?
	Fill in the tota	l amount of income y	ou received from all jobs and	d all busine	sses, including part	t-time activities.		•
	ii you are iiiii	ig a joint case and yo	u have income that you rece	ive togethe	r, list it offly office u	nder Deblor 1.		
	□ No							
	Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.		income e deductions and	Sources of income Check all that apply		Gross income (before deductions
			oncor all that apply.	exclus		Oncor all triat apply	, .	and exclusions)

Official Form 107

Debtor 1 Marilyn S. DeYoung Case number (if known)

					Debtor 1		Debtor 2		
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$10,670.00	☐ Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a business		
For last calendar year: (January 1 to December 31, 2016)				1, 2016)	■ Wages, commissions, bonuses, tips	\$11,259.00	☐ Wages, commissions, bonuses, tips		
					☐ Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2015)					■ Wages, commissions, bonuses, tips	\$5,900.00 Wages, commissions, bonuses, tips			
					☐ Operating a business		☐ Operating a business		
	and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotted winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.								
					Debtor 1		Debtor 2		
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:					Social security retirement	\$14,872.00			
For last calendar year: (January 1 to December 31, 2016)			•	1, 2016)	Social security retirement	\$22,308.00			
Pa 6.	Are ei	ither No.	Debtor 1's Neither De	or Debtor 2' btor 1 nor D	Made Before You Filed for s debts primarily consume ebtor 2 has primarily consu personal, family, or househo	r debts? umer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an	
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.							nd alimony. Also, do	
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
			□ No.	Go to line 7					
	Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to attorney for this bankruptcy case.								

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Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	GM Financial Leasing P.O. Box 100 Buffalo, NY 14231	\$350.00 monthly	\$1,050.00	\$24,000.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	rd ayment
7.	Within 1 year before you filed for bankruptul Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% o	neral partners; partners or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing ag	I partner; corporations gent, including one fo
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No		ments or transfer a	iny property on a	ccount of a de	bt that benefited an
	Yes. List all payments to an insider			_	_	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupt: Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	cy, was any of your prope ν.	erty repossessed, f	oreclosed, garnis	shed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fir	nancial institutior	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		erty in the possess	taker		fit of creditors, a

Debtor 1 Marilyn S. DeYoung

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Debii	warnyn 3. De roung	Case number	(II KIIOWII)	
Part	5: List Certain Gifts and Contribution	s		
3. V	Nithin 2 years before you filed for bankr	uptcy, did you give any gifts with a total value of more t	han \$600 per person	?
Ī	■ No □ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$60	Describe the gifts	Dates you gave	Value
	per person		the gifts	
	Person to Whom You Gave the Gift and Address:			
_		uptcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
_	■ No☐ Yes. Fill in the details for each gift or c	contribution.		
	Gifts or contributions to charities that t		Dates you	Value
	more than \$600 Charity's Name		contributed	
	Address (Number, Street, City, State and ZIP Code	e)		
Part	6: List Certain Losses			
	Nithin 1 year before you filed for bankru or gambling?	ptcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster
	■ No			
	Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	loss	lost
	List Contain Brown and an Transform	, .		
Part	7: List Certain Payments or Transfers	5		
6. V	Nithin 1 year before you filed for bankru consulted about seeking bankruptcy or p	ptcy, did you or anyone else acting on your behalf pay operating a bankruptcy petition?	or transfer any prope	rty to anyone you
		reparers, or credit counseling agencies for services require	d in your bankruptcy.	
	□ No			
ı	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was	Amount of
	Address Email or website address		made	payment
	Person Who Made the Payment, if Not Y		8/21/17	\$900.00
	West MI Bankruptcy Clinic, PC 297 W. Clay Ave., #104	Cash - does not include filing fees or costs for creditor counseling/debtor	0/21/17	\$900.00
	P.O. Box 1225	education.		
	Muskegon, MI 49443-1225			
p		ptcy, did you or anyone else acting on your behalf pay of ditors or to make payments to your creditors? soullisted on line 16.	or transfer any prope	rty to anyone who
	■ No			
	Yes. Fill in the details.			
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address	transferred	or transfer was made	payment

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already lis No	ness or financial affa as security (such as th	irs? ne granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and va property transferre		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you					
	Disney	Sold interval ow share loocated a back to seller 2/ market value of	at "Disney", 16 for it's fair	over t - no lu	funds to pay bills the past 1 1/2 years ump sum to any or creditor.	2/1/16
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		y property to a se	elf-settled	d trust or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and va	alue of the prope	erty trans	ferred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Stor	age Unit	s	
20.		ther financial accoun	nts; certificates o	f deposit		
21.	Do you now have, or did you have within 1 year cash, or other valuables? No	r before you filed for	bankruptcy, any	safe dep	osit box or other deposi	tory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		Describe 1	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	lace other than your	home within 1 ye	ear befor	e you filed for bankruptc	y?
	□ No ■ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe 1	the contents	Do you still have it?
	Storage facitliy	Debtor	C		old furnishings listed dule B/C - maximum ,000.00	□ No ■ Yes

Debtor 1 Marilyn S. DeYoung

Case number (if known)

Pa	t 9: Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pa	t 10: Give Details About Environmental Inform	nation		
For	the purpose of Part 10, the following definitions	s apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface water, groun	— ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	nmental law defines as a hazardous	s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	e under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	•	ironmental law? Include settlements	and orders.
	■ No			
	Yes. Fill in the details. Case Title	Court or agency	Nature of the case	Status of the
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	readure of the case	case
Pai	t 11: Give Details About Your Business or Co	nnections to Any Business		
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to an	y business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time	
	☐ A member of a limited liability compan	y (LLC) or limited liability partnersh	nip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execu	itive of a corporation		
	An owner of at least 5% of the veting o	v aguity accomitica of a comparation		

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Debtor	Marilyn S. DeYoung	Ca	se number (if known)
	No. None of the above applies. Go to F	Part 12.	
	Yes. Check all that apply above and fill	in the details below for each business.	
A	usiness Name ddress umber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
	stitutions, creditors, or other parties.	cy, did you give a financial statement to ar	nyone about your business? Include all financial
Α	ame ddress umber, Street, City, State and ZIP Code)	Date Issued	
Part 12	2: Sign Below		
are true	and correct. I understand that making a		declare under penalty of perjury that the answers btaining money or property by fraud in connection ars, or both.
/s/ Ma	rilyn S. DeYoung		
Marily	n S. DeYoung ure of Debtor 1	Signature of Debtor 2	
Date	August 22, 2017	Date	
Did you ■ No □ Yes	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
■ No		t an attorney to help you fill out bankruptcy	

Fill in this inform	nation to identify your	case:		
Debtor 1	Marilyn S. DeYou First Name	ng Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	nkruptcy Court for the:		RICT OF MICHIGAN	
	initiapley Court for the.			
Case number (if known)				Check if this is an amended filing
Official Fo Statemer		n for Indiv	viduals Filing Under Chap	ter 7 12/15
creditors have lease		ur property, or and the lease has n vithin 30 days after	ot expired. you file your bankruptcy petition or by the date	
on the If two married pe	form		e time for cause. You must also send copies to th are equally responsible for supplying correct	·
write y	and accurate as possib our name and case nur our Creditors Who Hav	mber (if known).	s needed, attach a separate sheet to this form. C	n the top of any additional pages,
			: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
information be Identify the cro	elow. editor and the property t	hat is collateral	What do you intend to do with the property the secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's G name:	M Financial Leasing	I	☐ Surrender the property.☐ Retain the property and redeem it.	□ No
Description of	2016 Chevrolet Ma	ılibu 14.742	Retain the property and enter into a	■ Yes
property securing debt:	miles	ket estimate condition ate	Reaffirmation Agreement. Retain the property and [explain]:	
	Insured: Farm Bur 1/1/18	eau Expires:		
Creditor's S	pinaker at the Shipy	ard HOA	■ Surrender the property.	■ No
name:			☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
Description of	P.O. Box 8048 Hilter Island, SC 29938 I County 7 days/starting Fel each year - located "Spinnaker at the	Beaufort bruary 3rd d at:	Reaffirmation Agreement.	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debt	or 1	Marily	n S. DeYoung	Case number (i	f known)
	operty curin(/ g debt:	complex. Value based on recent inquiries by debtor to "purchase a week now" Balance due is	☐ Retain the property and [explain]:	
Part :	2:	List You	ur Unexpired Personal Property Leases		
n the	ny un info	expired rmation	I personal property lease that you listed below. Do not list real estate leases. U	In Schedule G: Executory Contracts and Unnexpired leases are leases that are still in effect the trustee does not assume it. 11 U.S.C. § 3	ect; the lease period has not yet ended.
Desc	ribe	your un	expired personal property leases		Will the lease be assumed?
Less	or's n	ame:	GM Financial Leasing		□ No
					■ Yes
Desc Prop	•	n of leas	Lease for 2016 Chevy Malibu	through 6/20	
Part :	3:	Sign Be	elow		
			perjury, I declare that I have indicated mulpiect to an unexpired lease.	y intention about any property of my estate t	hat secures a debt and any personal
Χ	/s/ M	larilyn	S. DeYoung	X	
		•	DeYoung Debtor 1	Signature of Debtor 2	
	Date	Au	gust 22, 2017	Date	

Fill ir	this information to identify your case:					irected in this form and	in Form
Debt	or 1 Marilyn S. DeYoung		12	2A-1S	rbb:		
Debt (Spou	or 2 ee, if filing)			■ 1. T	here is no pres	umption of abuse	
Unite	ed States Bankruptcy Court for the: Western District of	Michigan		;	applies will be n	o determine if a presum nade under <i>Chapter 7 I</i> icial Form 122A-2).	
Case (if kno	e number			_	,	,	
(,					does not apply now be reservice but it could ap	
				☐ Ch	eck if this is a	n amended filing	
	<u>icial Form 122A - 1</u>						
Ch	apter 7 Statement of Your Cur	rent Mor	ithly Inc	om	е		12/15
attach case ı	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to what was a separate sheet to this form. Include the line number to what was a separate sheet to this form. Include the line number to what was a separate sheet to the number of the separate sheet and file Statement of Exempts. Calculate Your Current Monthly Income	hich the addition mapped a presumption of	al information of abuse becau	applies ise you	On the top of a do not have prir	ny additional pages, write narily consumer debts o	e your name and r because of
1.	What is your marital and filing status? Check one or	nly.					
	■ Not married. Fill out Column A, lines 2-11.						
	☐ Married and your spouse is filing with you. Fill ou	ut both Columns	A and B, lines	2-11.			
	\square Married and your spouse is NOT filing with you.	You and your s	pouse are:				
	\square Living in the same household and are not lega	ılly separated. F	ill out both Co	olumns	A and B, lines 2	2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading	egally separated	under nonbar	nkrupto	y law that applic	es or that you and your	
10 the	I in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 thro sult. Do not inclu	ugh Aug de any	gust 31. If the amount m	ount of your monthly incom ore than once. For example	e varied during le, if both
				Colui Debte		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissio	ns (before all	\$	1,434.96	\$	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payments from a	a spouse if	\$	0.00	\$	
	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Include regular d, your depender	contributions nts, parents,	\$	0.00	\$	
1	Net income from operating a business, profession,	or farm					
		Debt	tor 1				
	Gross receipts (before all deductions)	\$ 0.00 -\$ 0.00					
	Ordinary and necessary operating expenses		Copy here ->	\$	0.00	\$	
	Net monthly income from a business, profession, or fan Net income from rental and other real property	m \$	oopy nere ->	Ψ		Ψ	
6.	not moone non rental and other real property	Debt	tor 1				
	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	•\$	0.00	\$	
_	Interest dividends and revalties			\$	0.00	\$	

Official Form 122A-1

7. Interest, dividends, and royalties

Marilyn S. DeYoung Debtor 1 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1.434.96 1.434.96 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,434.96 Multiply by 12 (the number of months in a year) **x** 12 17,219.52 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. ΜI Fill in the number of people in your household. 1 47,088.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Marilyn S. DeYoung Marilyn S. DeYoung Signature of Debtor 1 Date August 22, 2017 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	:	Liquidation	
\$2	45	filing fee	
\$	75	administrative fee	
+ \$	15	trustee surcharge	
\$3	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:17-03939-jwb Doc #:1 Filed: 08/22/17 Page 50 of 52

United States Bankruptcy Court Western District of Michigan

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n re	Marilyn S. DeYoung		Case No.	
		Debtor(s)	Chapter	
	VERI	FICATION OF CREDITOR	MATRIX	
e abo	ove-named Debtor hereby verifies the	hat the attached list of creditors is true and c	orrect to the best	of his/her knowledge.
		/ / W II		
ate:	August 22, 2017	/s/ Marilyn S. DeYoung		
		Marilyn S. DeYoung		
		Signature of Debtor		

AMAZON/SYNCHRONY ATTN: BANKRUPTCY DEPT. P.O. BOX 965061 ORLANDO FL 32896-5061

AMERICAN EAGLE /SYNCHRONY ATTN: BANKRUPTCY DEPT. P.O. BOX 965060 ORLANDO FL 32896-5060

BEST BUY P.O. BOX 790441 SAINT LOUIS MO 63179

CHASE/SOUTHWEST CARD P.O. BOX 15298 WILMINGTON DE 19850-5298

CITIBANK
P.O.BOX 6500
SIOUX FALLS SD 57117

DISCOVER P.O. BOX 30943 SALT LAKE CITY UT 84130

GM FINANCIAL LEASING P.O. BOX 100 BUFFALO NY 14231

JC PENNEYS/SYNCHRONY BANK ATTN: BANKRUPTCY DEPT. P.O. BOX 965060 ORLANDO FL 32896-5060

KOHL'S P.O. BOX 3043 MILWAUKEE WI 53201-3043

LOWE'S/SYNCHRONY ATTN: BANKRUPTCY DEPT. P.O. BOX 965003 ORLANDO FL 32896-5060 OLD NAVY/SYNCHRONY ATTN: BANKRUPTCY DEPT. P.O. BOX 965003 ORLANDO FL 32893-5003

SAM'S CLUB/SYNCHRONY ATTN: BANKRUPTCY DEPT. P.O. BOX 965060 ORLANDO FL 32896-5060

SPINAKER AT THE SHIPYARD HOA C/O RMC P.O. BOX 8048 HILTON HEAD ISLAND SC 29938

TARGET
P.O. BOX 1581
MINNEAPOLIS MN 55440-1581

THE BUCKLE
C/O COMENITY BANK
ATTN: BANKRUPTCY DEPT.
P.O. BOX 182125
COLUMBUS OH 43218-2125

TJ MAXX/SYNCRHONY BANK ATTN: BANKRUPTCY DEPT. P.O. BOX 965060 ORLANDO FL 32896-5060

WALMART/SYNCHRONY ATTN: BANKRUPTCY DEPT. P.O. BOX 965065 ORLANDO FL 32896-5060

YOUNKER'S C/O COMENITY BANK ATTN: BANKRUPTCY DEPT. P.O. BOX 182125 COLUMBUS OH 43218-2125